

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10686460

FILING DATE 10-15-03

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
9		2				
10		2				
11		2				
12		2				
13		2				
14		2				
15		2				
16	1					
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50						
TOTAL IND.	2					
TOTAL DEP.	22					
TOTAL CLAIMS	24					

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
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TOTAL DEP.						
TOTAL CLAIMS						